

AOC-475 Doc. Code: WEX  
Rev. 3-04  
Page 1 of 1  
Commonwealth of Kentucky  
Court of Justice www.kycourts.net  
KRS 440.400



Case No. 09-F-686  
Court District  
County Boyd

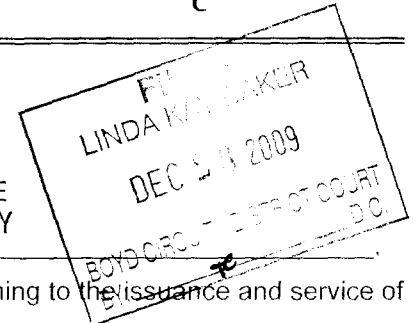
WAIVER OF EXTRADITION

RECEIVED

IN THE District COURT  
COUNTY OF Boyd

DEC 30 2009

SECRETARY OF STATE  
COMMONWEALTH OF KY



I, Harvey L. Lowry

being advised of my rights under the Statutes of the Commonwealth of Kentucky pertaining to the issuance and service of a Warrant of Extradition, and being further advised of my Constitutional Rights to obtain a Writ of Habeas Corpus, AND being charged with having committed the crime(s) of:

Failure to Register as Sex Offender

I do hereby, without reservation, and in view of my legal rights in extradition proceedings as explained to me, WAIVE ANY AND ALL SUCH LEGAL RIGHTS AND DO FURTHER, BY MY SIGNATURE HERETO AFFIXED, CONSENT TO BE RETURNED TO THE STATE OF OHIO, THERE TO STAND TRIAL ON THE CHARGE(S) ALLEGED.

In further witness of my VOLUNTARY AND UNCONDITIONAL CONSENT, I state that my SIGNATURE BELOW was SIGNED in the presence of this HONORABLE COURT without any THREATS, PROMISES, DURESS, or AGREEMENTS whatsoever, and with full KNOWLEDGE of my RIGHTS.

DATE: 12/23, 2009

Defendants Signature

The Defendant signed on 12/23, 2009, and signed in the presence of:

  
BOYD DISTRICT

Judge

Court

Distribution: Original to Secretary of State  
Copy to: Demanding Agent  
Court  
Defendant

pick up by:  
1-2-10

## RECEIPT OF WARRANT BY EXECUTING AUTHORITY

## First Receipt

Received this warrant on . . . . ., 20 . 07 . .

at . . . . . o'clock . . . . . m.

Vernon P. Stanforth, Sheriff

Officer

By Title

## Subsequent Receipt

Received this (alien) (warrant) on . . . . ., 20 . 07 . .

at . . . . . o'clock . . . . . m.

Vernon P. Stanforth, Sheriff

Officer

By Title

BY

★★★★★★★★

## RETURN OF EXECUTED WARRANT

## 1. Execution by Arrest

I received this warrant on . . . . ., 20 . . . . . at . . . . . o'clock . . . . . m. On . . . . ., 20 . . . . . I arrested . . . . . and gave / him/her / a copy of this warrant with complaint attached and brought / him/her / to . . . . . state the place

Arresting Officer, Title

## 2. Execution By Issuance of Summons Under Rule 4(A) (2) By Executing Officer

I received this warrant on . . . . ., 20 . . . . . at . . . . . o'clock . . . . . m. On . . . . ., 20 . . . . . I executed this warrant by issuing . . . . . a summons by / personal service / residence service / which ordered him/her to appear at . . . . . time . . . . . at the captioned Court. The summons was endorsed upon the warrant and accompanied by a copy of the complaint.

Issuing Officer, Title

## 3. Execution by Arrest and Issuance of Summons under Rule 4(F) by Arresting Officer

I received this warrant on . . . . ., 20 . . . . . at . . . . . o'clock . . . . . m. On . . . . ., 20 . . . . . I arrested . . . . . and after arrest I issued him/her a summons by personal service which ordered him/her to appear at captioned Court at . . . . . time . . . . . The summons was endorsed upon the warrant and accompanied by a copy of the complaint.

Arresting-Issuing Officer, Title

## 4. Execution by Arrest and Issuance of Summons under Rule 4(F) by Superior of Arresting Officer

On . . . . ., 20 . . . . . was arrested by . . . . . name of arresting officer . . . . . and I issued . . . . . a summons by personal service which ordered / him/her / to appear at . . . . . time, day, date, room . . . . . at the captioned Court. The summons was endorsed upon the warrant and accompanied by a copy of the complaint.

Issuing Officer, Title

★★★★★★★★

## RETURN OF UNEXECUTED WARRANT

I received this warrant on . . . . ., 20 . . . . . at . . . . . o'clock . . . . . m. On . . . . ., 20 . . . . . I attempted to execute this warrant but was unable to do so because . . . . . state specific reason or reasons and . . . . .

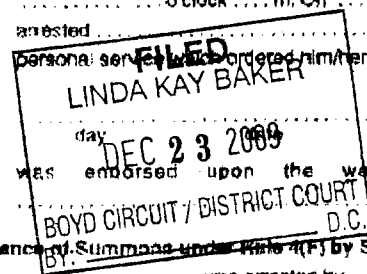
additional information regarding defendant's whereabouts

Executing Officer, Title

Fees
Mileage \$ . . . . .
Total \$ . . . . .

Fees
Mileage \$ . . . . .
Total \$ . . . . .

Fees
Mileage \$ . . . . .
Total \$ . . . . .



THE STATE OF OHIO

vs

Harvey Lee Lowry

Name

AT LARGE

Address

Washington C.H. Municipal Court  
Washington C.H., Fayette County, Ohio

Criminal Case No. CAD 09-12595

2009 DEC 22 PM 2:22

COMPLAINT  
(RULE 4)

\*\*\*\*\*

The undersigned Complainant, being duly sworn, states that on or about September 19, 2009,

within Fayette County,

Ohio,

Harvey Lee Lowry

defendant's name

did, Being a person required to register as a sex offender with the Fayette County, Ohio Sheriff's Office, pursuant to the Ohio Revised Code 2950.04, did fail to provide a written verification of his current residential address as required. The conviction of Unlawful Sexual Conduct with a minor, ORC 2907.04 is the underlying offense that mandates his registration as a sex offender.

in violation of section 2950.04 F-4 ORC  
city ordinance-state statute

Sworn to before me, and subscribed in my presence this 22nd day of December, 2009.

Complainant

Judge—Clerk—Deputy Clerk—Municipal Court

\*\*\*\*\*

THE STATE OF OHIO

vs

Harvey Lee Lowry

Name

AT LARGE

Address

Washington C.H. Municipal Court  
Washington C.H., Fayette County, Ohio

Criminal Case No.

WARRANT ON COMPLAINT  
(RULE 4)To any law enforcement officer of Fayette County  
(this city/this county)

WHEREAS, there has been filed with me a complaint charging that

Harvey Lee Lowry

(defendant's name or description allowing reasonably certain identification)

Failed to register his residential address 1 in violation of  
(description of offense—ordinance or statute title)

Section 2950.04 F-4 ORC a copy of which is incorporated hereto.  
(city ordinance/statute No.)

YOU ARE COMMANDED to arrest the above described person in this or any adjoining county you shall find him and bring him without necessary delay before this issuing Court to answer unto the charge set forth herein, or, if he be found in any other than this or any adjoining county, to arrest and take him before a court of record therein having jurisdiction of this offense, to be dealt with according to law.

Special instructions to executing officer:

Sworn before me, and subscribed in my presence this 22nd day of December, 2009.

Judge—Clerk—Deputy Clerk—Municipal Court

NOTICE TO DEFENDANT: For information regarding your duty to appear call 740-638-2350. The address of the Court is:  
119 N. Main St., Washington C.H., Ohio.

IN THE WASHINGTON C.H. MUNICIPAL COURT  
WASHINGTON C.H., OHIO

The State of Ohio  
Vs  
Harvey Lee Lowry  
Name  
AT LARGE  
Address

Affidavit in Support of  
Complaint For Arrest Warrant

Case No. \_\_\_\_\_

## AFFIDAVIT

Deputy Sheriff Robert A. Russell, being duly sworn, says: that on or about  
(Affiant's name)

September 19, 2009, within Fayette County, Ohio  
(county/city/village/etc.)

Ohio, Harvey Lee Lowry  
(defendant's name) \*

As a convicted sex offender, upon his release from prison, failed to register his residential address or transfer his residential address as required under Ohio Revised Code 2950.04, in violation of 2950.03 a felony of the 4<sup>th</sup> degree.

  
(Affiant's signature)

Sworn to and signed in my presence this 22nd day of December 2009,

at Washington C.H., Ohio.

  
Dep. (Clerk)

\*In ordinary, concise language describe the facts of the occurrence.

## UNIFORM CITATION

OFFENDER/VIOLATOR	AGENCY: KY STATE POLICE, POST 14 NAME: LAST, FIRST, MI, FILIAL: LOWRY, HARVEY L. ALIAS NAME: LAST, FIRST, MI, FILIAL: _____ ADDRESS (NUMBER, NAME, SUFFIX): 2425 BOONE STREET APT 2 CITY: ASHLAND STATE: KY ZIP CODE/EXTENSION: 41101 ID TYPE: XX ID STATE: _____ ID NUMBER: _____ S. S. NUMBER: 280-84-0768 <input type="checkbox"/> COMMERCIAL VEHICLE <input type="checkbox"/> PLACARDED HAZARDOUS VEHICLE DATE OF BIRTH: 02/02/1986 SEX: <input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE RACE: <input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> AM. INDIAN OR ALASKA <input type="checkbox"/> ASIAN PLACE OF EMPLOYMENT/OCCUPATION: _____ CITY: _____ STATE: _____										ORI: KSP1400 ATTN: <input type="checkbox"/>		HOME PHONE: UNKNOWN EMERGENCY PHONE: UNKNOWN KENTUCKY RESIDENT STATUS: <input checked="" type="checkbox"/> F: FULL-TIME <input type="checkbox"/> P: PART-TIME <input type="checkbox"/> N: NON RESIDENT		COURT
	MARITAL STATUS: MARRIED VICTIM'S RELATIONSHIP TO OFFENDER: _____ HEIGHT: 5'08" WEIGHT: 175 HAIR COLOR: BROWN EYE COLOR: BLUE ETHNIC ORIGIN: <input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON HISPANIC B.A. RESULTS: <input type="checkbox"/> BREATH <input type="checkbox"/> BLOOD <input type="checkbox"/> URINE ALCOHOL/DRUG INVOLVEMENT: <input type="checkbox"/> ALCOHOL <input type="checkbox"/> DRUGS <input type="checkbox"/> UNKNOWN														
	VEHICLE MAKE: BUICK VEHICLE MODEL: 3600 VEH. YEAR: 1992 VEHICLE COLOR: SILVER/ALUMINU VEH. TYPE: 4T REGISTRATION: STATE, YEAR, NUMBER: KY 2010 072JRB VEHICLE IDENTIFIERS: _____ MPH: _____ IN MPH ZONE: _____ VIOL. KEY: _____														
	VIOLATION DATE: 12/22/2009 VIOLATION TIME: 7:20PM EXACT LOCATION OF VIOLATION: POLLARD RD ARREST DATE: 12/22/2009 TIME OF ARREST: 7:20PM EXACT LOCATION OF ARREST: POLLARD RD MILES: _____ DIRECTION: _____ CITY: ASHLAND COUNTY: BOYD SECTOR: _____ MILES: _____ DIRECTION: _____ CITY: ASHLAND COUNTY: BOYD SECTOR: _____														
	CHARGES AND POST-ARREST COMPLAINT POST-ARREST COMPLAINT Charge 5: FUGITIVE FROM ANOTHER STATE - WARRANT REQUIRED <div style="border: 1px solid black; padding: 10px; margin: 10px auto; width: fit-content;"> <p style="text-align: center; margin: 0;"><b>FILED</b></p> <p style="text-align: center; margin: 0;">LINDA KAY BAKER</p> <p style="text-align: center; margin: 0;">DEC 23 2009</p> <p style="text-align: center; margin: 0;">BOYD CIRCUIT / DISTRICT COURT</p> <p style="text-align: center; margin: 0;">BY: _____ D.C.</p> </div>														
	COURT DATE: _____ COURT TIME: _____ <input type="checkbox"/> PAYABLE <input checked="" type="checkbox"/> COURT COURT CASE NUMBER: 09-F-684 TOTAL PREPAYABLE AMOUNT: _____ NOT PREPAYABLE WITNESS 1 NAME: LAST, FIRST, MI, FILIAL: _____ STATE: _____ ZIP CODE: _____ WITNESS 1 ADDRESS (NUMBER, STREET, SUFFIX): _____ CITY: _____ WITNESS 2 NAME: LAST, FIRST, MI, FILIAL: _____ STATE: _____ ZIP CODE: _____ WITNESS 2 ADDRESS (NUMBER, STREET, SUFFIX): _____ CITY: _____														
	COURT LOCATION: BOYD YEAR: 09 CONTROL NUMBER: AM67784 TYPE: 1														
	OFFICER SIGNATURE: GOODALL, S. BADGE/I.D. NUMBER: 886 ASSIGNMENT: 14 <input type="checkbox"/> CARRIED FOR UCR BY OTHER AGENCY SPECIFY: _____ <input checked="" type="checkbox"/> IN-CAR VIDEO <input type="checkbox"/> FINGERPRINTS <input type="checkbox"/> PHOTOS <input type="checkbox"/> EVIDENCE HELD														